Effective OCYODO(1, 2003												J.
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THA				
F	OTAL CLAIM	\$	100/0/11	11111 21	ŗ	RATE	FEE	7	RATE	FEE		
F	OR		NUMBER FILED NUM			BER EXTRA		BASIC FEE	 	OR		3770
- -	OTAL CHARGE	ABLE CLAIMS	10						1000	7		- 110
INDEPENDENT CLAIMS			() * *		* /	/	- -	X\$4 =	<u> </u>	OR	X\$18 =	<u> </u>
[1111103 0 =					X43=	ļ	OR	X86=	ļ
MULTIPLE DEPENDENT CLAIM PRESENT								+145=	. .	OR	+390=	j
* If the difference in column 1 is less than zero, enter "0" in column 2						L.	TOTAL		OR	TOTAL		
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL	ENTITY	or	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	EST BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ž	Total	*	Minus	## -		=		X\$ Q ≈		OR	X\$(8=	
AME	Independent	*	Minus	***		=		X43=	·	OR	126-	
<u></u>	FIRST PRES	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM			+ 45:=		OR	÷340=	
•							 . 1Δ	TOTAL ODIT, FEE		OR	TOTAL ADDIT. FEE	
		(Column 1) (Column 2)				(Column 3)			•			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ž.	Total	*	Minus	**		=		x\$9≈		OR	x\$/8=	
AME	Independent	*	Minus	***		=		X43=		OR	×86=	
L	FIRST PRESE	IRST PRESENTATION OF MULTIPLE D		PENDENT CLAIM				+145=		OR	t290=	
					-		. I	TOTAL DIT. FEE		OR ,	TOTAL ADDIT: FEE	
. •		(Column 1) (Column 2)		(Column 3)	AL	DIII. 1 CC .		,				
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		x\$9=	~	OR	X\$[8=	
	Independent	*	Minus	***		=	\vdash	XB=		t	×86	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			OR		······································
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	tôAD=	
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	TOTAL DDIT. FEE	
1	he "Highest Num	ber Previously Paid	For" (Total or	Independen	t) is the l	highest number	lound	in the app	ropriate box	in colu	mn 1	